Name of Person Filing Document: Your Address: Your City, State, and Zip Code: Your Telephone Number: ATLAS Number (if applicable) Attorney Bar Number (if applicable):		
SUPERIOR CO	URT OF ARIZONA IN I	MARICOPA COUNTY
Name of Petitioner (in original case)	Case Number	
Name of Fellioner (in original case)	ORDER TO APP	
Name of Respondent (in original case)		ANGE OF CUSTODY, (Formerly "VISITATION") R.S. 25-411)
This is an important Court Order the understand this Order, contact a l		is Order carefully. If you do NOT
Based on the "Petition for Change of C		upport" and pursuant to Arizona law,
IT IS ORDERED 1. That Petitioner the time and place stated below	and Respondent so the court can determine wheth	appear at ner the Petition should be granted.
NAME OF JUDICIAL OFFICER	:	
DATE AND TIME OF HEARING):	
PLACE OF HEARING: 101 West Jefferson 201 West Jefferson Floor Floor	son 222 East JavelinFloor	na 14264 W. Tierra Buena LaneFloor
Phoenix, Arizona Phoenix, Arizon	a Mesa, Arizona	Surprise, Arizona
more time is needed. All parties a failure to appear, the court may by the party who does appear.	ay make such orders as are just, i	eys or not, must be present. If there is including granting the relief requested modify or enforce child support, and
documents filed with the Petition	, and in a	e Petition, Affidavits, and related er or sheriff by the moving party on the ccordance with Rule 4, 4.1 and 4.2,
Copies of the "Response and Op		it(s)" by(date). d on the moving party or if the moving nce with Rule 5, Arizona Rules of Civil
DONE IN OPEN COURT:	ludgo/Commission	Signar of the Superior Court
	Judge/Commiss	sioner of the Superior Court
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